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ASSISTANT COMMISSIONER FOR PATENTS
Washington, DC 20231

PATENT
File No.: 1503.65173
Date: January 31, 2001

Sir:

Transmitted herewith for filing pursuant to 35 U.S.C. §111(a), is the patent application of

Inventor(s): Koichiro Yamashita

For: SCHEDULING APPARATUS PERFORMING
JOB SCHEDULING OF A PARALLEL COMPUTER
SYSTEM

I hereby certify that this paper is being deposited with the United States Postal Service as EXPRESS MAIL in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231, on Jan 31, 2001.
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Enclosed are:

- (X) 50 pages of specification, including 16 claims and an abstract.
- (X) an executed oath or declaration, with power of attorney.
- () an unexecuted oath or declaration, with power of attorney.
- () sheet(s) of informal drawing(s).
- (X) 21 sheet(s) of formal drawings(s).
- (X) Assignment(s) of the invention to FUJITSU LIMITED and Assignment Recordation Form.
- (X) A check in the amount of \$ 40.00 to cover the fee for recording the assignment(s) is enclosed.
- (X) Information Disclosure Statement; Form PTO-1449 and cited references.
- (X) Claim for Priority and Priority Document
- () PCT Request (Courtesy copy)

Fee Calculation For Claims As Filed

a) Basic Fee						\$ 710.00
b) Independent Claims	<u>12</u>	-	3	=	9	x \$ 80.00 = \$ <u>720.00</u>
c) Total Claims	<u>16</u>	-	20	=	<u> </u>	x \$ 18.00 = \$ <u> </u>
d) Fee for Multiple Claims						\$270.00 = \$ <u> </u>
Total Filing Fee						\$1,430.00

- () Applicant qualifies for Status as Small Entity, reducing Filing Fee by half to \$
- (X) A check in the amount of \$ 1,430.00 to cover the filing fee is enclosed.

Preliminary Amendment

- () Please insert the following between the title and line 1 of the specification: "This is a continuation of ".
- (X) The Commissioner is hereby authorized to charge any additional fees which may be required to this application under 37 C.F.R. §§1.16-1.17, or credit any overpayment, to Deposit Account No. 07-2069. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 07-2069. A duplicate copy of this sheet is enclosed.

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By: *[Signature]*
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